



**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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February 25, 2016

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From: Philip L. Browning
Director

WEST COVINA FOSTER FAMILY AGENCY dba HOMES OF HOPE, CASA ESPERANZA TREATMENT CENTER GROUP HOME QUALITY ASSURANCE REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of West Covina Foster Family Agency dba Homes of Hope, Casa Esperanza Treatment Center Group Home (the Group Home) in May 2015. The Group Home has one licensed office in the First Supervisorial District and provides services to the County of Los Angeles DCFS placed children and youth. According to the Group Home's program statement, its stated mission is, "to provide quality residential foster care to minors who are unable to live with their families and instill hope, trust, joy and meaning in the lives of minors in care."

The QAR looked at the status of the placed children's safety, permanency and well-being during the most recent 30 days and the Group Home's practices and services over the most recent 90 days. The Group Home scored at or above the minimum acceptable score in all 9 focus areas: Safety, Permanency, Placement Stability, Visitation, Engagement, Service Needs, Assessment & Linkages, Teamwork and Tracking & Adjustment.

The Group Home did not require a Quality Improvement Plan, as the Group Home scored at or above the minimal acceptable score in all focus areas of the QAR. In August 2015, OHCMD Quality Assurance Reviewer met with the Group Home to discuss results of the QAR.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:EM:KR:rds

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
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Sukhwinder Singh, Executive Director, West Covina FFA dba Homes of Hope, Casa Esperanza GH
Lajuannah Hills, Regional Manager, Community Care Licensing Division
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"To Enrich Lives Through Effective and Caring Service"

**WEST COVINA FOSTER FAMILY AGENCY dba HOMES OF HOPE,
CASA ESPERANZA TREATMENT CENTER GROUP HOME
QUALITY ASSURANCE REVIEW (QAR)
FISCAL YEAR 2014-2015**

SCOPE OF REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of West Covina Foster Family Agency dba Homes of Hope, Casa Esperanza Treatment Center Group Home (the Group Home) in May 2015. The purpose of the QAR is to assess the Group Home's service delivery and to ensure that the Group Home is providing children with quality care and services in a safe environment, which includes physical care, social and emotional support, education and workforce readiness, and other services to protect and enhance their growth and development.

The QAR is an in-depth case review and interview process designed to assess how children and their families are benefiting from services received and how well the services are working. The QAR utilizes a six-point rating scale as a *yardstick* for measuring the situation observed in specific focus areas. The QAR assessed the following focus areas:

Status Indicators:

- Safety
- Permanency
- Placement Stability
- Visitation

Practice Indicators:

- Engagement
- Service Needs
- Assessment & Linkages
- Teamwork
- Tracking & Adjustment

For Status Indicators, the reviewer focuses on the child's functioning during the most recent 30 day period and for Practice Indicators, the reviewer focuses on the Group Home's service delivery during the most recent 90 day period.

For the purpose of this QAR, interviews were conducted with three focus children, three Department of Children and Family Services (DCFS) Children's Social Workers (CSWs), and three Group Home staff members.

At the time of the QAR the focus children's average number of placements was five. Their overall average length of placement was 15 months and their average age was 15. There were four children placed at the Group Home and the focus children were included as part of the sample for the 2014-2015 Contract Compliance Review.

QAR SCORING

The Group Home received a score for each focus area based on information gathered from on-site visits, agency file reviews, DCFS court reports and updated case plans, and interviews with the Group Home staff, DCFS CSWs, service providers, and the children. The minimum acceptable score is 6 in the area of Safety and 5 in all remaining areas.

Focus Area	Minimum Acceptable Score	GH QAR Score	GH QAR Rating
Safety - The degree to which the Group Home ensures that the child is free of abuse, neglect, and exploitation by others in his/her placement and other settings.	6	6	Optimal Safety Status - The focus children are optimally and consistently avoiding behaviors that cause harm to self, others, or the community and are free from abuse, neglect, exploitation, and/or intimidation in placement.
Permanency - The degree to which the child is living with caregivers, who are likely to remain in this role until the child reaches adulthood, or the child is in the process of returning home or transitioning to a permanent home and the child, the Group Home staff, caregivers and CSW, support the plan.	5	5	Good Status - The focus children have substantial permanence. The focus children live in a family setting that the children, Group Home staff, caregivers, caseworker, and team members have confidence will endure lifelong.
Placement Stability - The degree to which the Group Home ensures that the child's daily living, learning, and work arrangements are stable and free from risk of disruptions and known risks are being managed to achieve stability and reduce the probability of future disruption.	5	5	Good Stability - The focus children have substantial stability in placement and school settings with only planned changes and no more than one disruption. The focus children have established positive relationships with primary caregivers, key adult supporters, and peers in those settings.
Visitation - The degree to which the Group Home staff support important connections being maintained through appropriate visitation.	5	5	Substantially Acceptable Maintenance of Visitation & Connections - Generally effective family connections are being sought for all significant family/Non-Related Extended Family Members (NREFMs) through appropriate visits and other connecting strategies.

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Focus Area	Minimum Acceptable Score	GH QAR Score	GH QAR Rating
Engagement - The degree to which the Group Home staff working with the child, biological family, extended family and other team members for the purpose of building a genuine, trusting and collaborative working relationship with the ability to focus on the child's strengths and needs.	5	5	Good Engagement Efforts - To a strong degree, a rapport has been developed, such that the Group Home staff, DCFS CSW, certified foster parents and the focus children feel heard and respected.
Service Needs - The degree to which the Group Home staff involved with the child, work toward ensuring the child's needs are met and identified services are being implemented, supported and are specifically tailored to meet the child's unique needs.	5	5	Good Supports & Services - A good and substantial array of supports and services substantially matches intervention strategies identified in the case plan. The services are generally helping the focus children make progress toward planned outcomes. A usually dependable combination of informal and formal supports and services are available, appropriate, used, and seen as generally satisfactory.
Assessment & Linkages - The degree to which the Group Home staff involved with the child and family understand the child's strengths, needs, preferences, and underlying issues and services are regularly assessed to ensure progress is being made toward case plan goals.	5	5	Good Assessment and Understanding - The focus children are functioning and support systems are generally understood. Information necessary to understand the focus children's strengths, needs, and preferences is frequently updated. Present strengths, risks, and underlying needs requiring intervention or supports are substantially recognized and well understood.
Teamwork - The degree to which the "right people" for the child and family have formed a working team that meets, talks, and makes plans together.	5	5	Good Teamwork - The team contains most of the important supporters and decision makers in the focus children's lives, including informal supporters. The team has formed a good, dependable working system that meets, talks, and plans together.

Focus Area	Minimum Acceptable Score	GH QAR Score	GH QAR Rating
Tracking & Adjustment - The degree to which the Group Home staff who is involved with the child and family is carefully tracking the progress that the child is making, changing family circumstances, attainment of goals and planned outcomes.	5	5	Good Tracking and Adjustment Process - Intervention strategies, supports and services being provided to the focus children are generally responsive to changing conditions. Frequent monitoring, tracking, and communication of the focus children's status and service results to the team are occurring. Generally successful adaptations are based on a basic knowledge of what things are working and not working for the focus children.

STATUS INDICATORS
(Measured over last 30 days)

What's Working Now (Score/Narrative of Strengths for Focus Area)

Safety (6 Optimal Safety Status)

Safety Overview: The Group Home provides a safe living environment for the focus children. The Group Home staff is highly competent in providing a safe living situation for the focus children. The Group Home staff reported that they always interact with the focus children and provide proper supervision.

According to the focus children the Group Home childcare workers are quick to intervene when dangerous situations arise and they always spend time talking with the focus children in order to understand their needs. The Group Home administrator stated that the Group Home therapist follows up with the focus children's DCFS CSW to address their concerns. Meetings were scheduled to address the reported Special Incident Reports (SIRs) and to develop a safety plan to ensure the safety of the placed children.

In efforts to ensure the safety of the placed children, the Group Home provides training, such as Suicide Prevention training, Pro-Act training, and Crisis Intervention training to staff regularly. The Group Home administrator provides weekly supervision to the Group Home staff. All of the placed children's daily activities and schedules are monitored by the Group Home in-home manager. The Group Home staff generally conducts daily inspections of the Group Home site and utilizes a home inspection check-off list to ensure that the Group Home environment is in compliance with Title 22 regulations.

For incidents related to self-injurious behavior or suicidal ideation, the Group Home promptly contacts the Psychiatric Mobile Response Team and requests immediate assistance. The Group Home

administrator and staff also closely supervise the child in crisis. In addition, to ensure the safety of the child in crisis, the Group Home staff monitor the placed child's activities closely and ensure that there are no objects that could be dangerous in the child's vicinity. To address this type of behavior the Group Home develops a safety contract and a safety plan with the participation of the DCFS CSW, the placed child, Group Home staff, and the therapist.

For situations related to the placed children running away, the Group Home appropriately reports this information to the Child Protection Hotline and files missing person reports with Law Enforcement. Additionally, the Group Home staff follows the placed child on foot and utilizes crisis communication and intervention, attempting to assist the placed child with making better decisions and requesting that they return to the Group Home. When placed children return to the Group Home, following a runaway incident, a safety plan is immediately established to assist the placed child with understanding that running away could be dangerous. The Group Home staff share the runaway information with the DCFS CSW. The Group Home staff also shared the runaway incident with the Group Home therapist so that they may follow and address it to the placed child in order to understand the triggers associated with the runaway behavior.

All of the focus children reported feeling safe at all times and always being supervised by the Group Home staff. The DCFS CSWs reported that they had no safety concerns regarding the Group Home and that staff always monitored the focus children. One DCFS CSW added that he is always involved in the development of the focus child's safety plan and follows up with the Group Home regarding any SIRs.

The Group Home submitted 13 SIRs through the I-Track database during the last 30 days. The focus children were involved in nine of the SIRs reported. The first focus child was involved in four SIRs including; two incidents involving running away; one incident was related to substance abuse at school; and the other incident included police involvement. The second focus child was involved in one SIR related to a suicide ideation. The third focus child was involved in four SIRs; two incidents involved running away; one incident related to illness; and one incident was related to a hospitalization.

The Group Home complied with the procedures and protocols for reporting SIRs. All SIRs were submitted timely and properly cross-reported to all required parties during the last 30 days. The Group Home did not have any child abuse referrals investigated by the Out-of-Home Care Investigations Section during the last 30 days.

Permanency (5 Good Status)

Permanency Overview: The Group Home provided substantial permanence for each of the focus children. The Group Home staff worked with the DCFS CSWs to ensure that legal steps to permanence were achieved. The Group Home is providing permanency services that include teaching the focus children life skills. Permanency goals were documented in the focus children's Needs and Services Plans (NSPs) to ensure that Group Home staff and the treatment team are aware of each focus child's permanency goals. Meetings are also held between the Group Home staff and DCFS CSWs in order to discuss the permanency goals for the focus children.

The first focus child reported that her permanent plan is Permanent Planned Living Arrangement. The focus child stated that the current plan for her is to remain in the Group Home placement until she is able to transition to a lower level of care. She is planning to go to college after graduating from high school. She also reported that the Group Home is also assisting her with developing independent living skills such as learning to cook and how to do laundry. The second and third focus children are receiving court ordered family reunification services. Their concurrent permanency plan is legal guardianship with relatives. The second and the third focus child reported that they are aware of their permanency goals and reported that they discuss their goals with the Group Home social worker.

The DCFS CSWs reported that they regularly communicate with the Group Home social workers to ensure that the Group Home is following DCFS recommendations and supporting the permanency plan for the focus children.

Placement Stability (5 Good Stability)

Placement Stability Overview: The Group Home provided good placement stability for the focus children. The Group Home staff assesses each focus child's needs prior to placement. The Group Home staff also utilizes the focus children's court orders, intake assessment, placement history, medical and mental health history to assess the well-being of the focus children; reviewing this data assists the Group Home with preventing possible placement disruptions. The Group Home staff also work closely with the focus children's teachers and attend school conferences.

The first focus child reported that she likes her placement and cannot think of any improvement needed in her current placement. The second focus child stated that she is provided with everything she needs. The third focus child reported that the Group Home staff always motivate her to go to school and focus on her education.

The DCFS CSWs for the focus children stated that they ensure that appropriate services are in place for the focus children. The DCFS CSWs reported discussing the focus children's needs and concerns with the Group Home staff during face-to-face contact, meetings, by telephone, or through e-mails. They reported that the focus children have not had any placement disruptions within the last 30 days. The first focus child's DCFS CSW stated that the focus child requires intensive mental health services and she was initially thinking of replacing the child to a higher level of care. However, the Group Home provides all needed mental health services for the focus child and therefore replacement was not necessary as her placement is stable. The second and the third focus children's DCFS CSWs reported that they work with the Group Home staff closely to ensure that the focus children's placements are stable.

Visitation (5 Substantially Acceptable Maintenance of Visitation & Connections)

Visitation Overview: Family connections for the focus children are well maintained. If necessary, the Group Home monitors and provides transportation for family visits. When face-to-face visitation is not a viable option, the Group Home staff and DCFS CSWs encourage and support alternative methods of communication such as telephone, e-mail, and social media in order to maintain those connections that are important to the focus children. The Group Home maintains logs regarding visits to monitor the focus children's degree of visitation with their family members.

All of the focus children have unmonitored visits with family members. The first focus child reported that she has visits with her adult brother, maternal aunt and maternal grandmother, and the Group Home provides transportation for her visits. The focus child added that she is happy to be able to maintain contact with her family members. The second focus child stated that she has visits with her paternal grandmother at the Group Home and she enjoys the visits. The third focus child reported that she has visits with her maternal grandmother. The focus child also mentioned to the Group Home staff that she has other relatives that she would like to visit with. The Group Home staff made several attempts to contact a relative of the focus child to encourage them to visit. With the persistence of the Group Home staff, the focus child is now having visits with her relative.

The DCFS CSWs reported that the Group Home is very good in ensuring that the visits are convenient for the focus children's relatives.

PRACTICE INDICATORS
(Measured over last 90 days)

What's Working Now (Score/Narrative of Strengths for Focus Area)

Engagement (5 Good Engagement Efforts)

Engagement Overview: The Group Home made consistent and good efforts toward engaging the focus children and key people in the decisions that affect the focus children. The Group Home maintains a good relationship with the DCFS CSWs and key parties such as therapists and school teachers that are involved in the focus children's lives. The Group Home ensures that connections are made between the focus children, Group Home staff, and DCFS CSWs on a regular basis.

All of the focus children reported that they are able to discuss their needs and concerns with the Group Home staff, DCFS CSWs, and their family members without any problems. The first focus child stated that she received ongoing support and communication from the Group Home staff and expressed no concerns as to the Group Home. According to the second focus child, there is always open communication with the Group Home staff and other key parties. The third focus child stated that the Group Home made good efforts to engage her relatives.

The DCFS CSWs reported that the Group Home staff always keeps them informed of the focus children's progress, special incidents, medical, dental, and mental health status. The DCFS CSWs are also included in discussions regarding the focus children's well-being.

Service Needs (5 Good Supports & Services)

Service Needs Overview: The Group Home has a good array of supports and services that match intervention strategies identified in the NSPs for each of the focus children. The focus children are receiving therapeutic services, such as weekly individual counseling and therapeutic behavioral services to address their mental health needs, as well as regular medical and dental check-ups. In addition, the focus children are also receiving tutoring to help them improve academically. The Group Home staff helps the focus children to enhance their independent living skills, such as performing effective job searches, completing job applications, cooking, and budgeting.

The first focus child attends substance abuse treatment and is encouraged to participate in meetings to address her substance abuse. The second focus child stated that she is very satisfied with the mental health services provided by the Group Home. The focus child was prescribed psychotropic medications and to see a psychiatrist monthly for medication management. The third focus child reported that the Group Home staff works closely with her and provides support, services, guidance, and immediate supervision or intervention in her daily settings. All of the focus children reported that the services provided were appropriate and are meeting their needs.

The DCFS CSWs for the focus children reported that they worked with the Group Home on a regular basis in the development and implementation of the focus children's NSP goals.

Assessment & Linkages (5 Good Assessments and Understanding)

Assessment & Linkages Overview: The Group Home provides a good assessment and understanding of the needs of the focus children. The Group Home social workers meet with the focus children daily to assess their progress and well-being. The Group Home administrator and Group Home social workers met with the DCFS CSWs to discuss the focus children's progress and evaluate their needs.

The focus children meet with their therapists at the Group Home to assess their mental health status and the progress made toward their case plan goals. Progress is also determined by observations from the Group Home staff. The first focus child enjoys ice-skating, watching movies, and going to the gym every weekend. The second focus child participates on her school's basketball team. The third focus child stated that she is not interested in any extracurricular activities at this time. All of the focus children added that the Group Home also provides outdoor activities, such as a trip to Knott's Berry Farm and shopping.

The Group Home includes the school social worker in obtaining and sharing information about the focus children. For example, the first focus child was performing unsatisfactorily in school and was not turning in her homework. The Group Home social worker met with the focus child and the school social worker to develop a plan to assist the focus child with improving her academic performance. As a result of the meeting, the focus child is now completing and submitting her homework. The Group Home also provides in-home tutoring for all three focus children.

Teamwork (5 Good Teamwork)

Teamwork Overview: The Group Home has formed a good, dependable working system by meeting often. The Group Home includes most of the important supporters and decision makers in the focus children's lives. The Group Home staff maintain regular face-to-face meetings with DCFS CSWs when discussing the treatment goals and service plans for the focus children.

The Group Home ensures that communication is open, accurate, and is shared with all team members. The Group Home administrator ensures the Group Home staff share information regarding the focus children's progress with all appropriate parties. One Group Home childcare worker reported that she understood the focus children's behaviors very well and if she saw something unusual she would share the information with the DCFS CSWs. The focus children reported that if they are not

satisfied with the team functioning, they can share their concerns with the Group Home administrator or through the regular group discussion. The focus children reported that they are satisfied with the teamwork demonstrated by their team members.

The first focus child reported that she just had a meeting with her team members. The team meeting included the Group Home administrator, Group Home therapist, Group Home social worker, and the therapeutic behavioral services worker to address her mental health needs. The second focus child stated that her DCFS CSW and her grandparents attended a meeting with the Group Home staff to discuss her visits with her grandparents and also address her needs and to review her NSP goals. The third focus child added that several meetings were held with her DCFS CSW and the Group Home staff to address her behavioral issues and explore whether additional support is needed.

The focus children's DCFS CSWs reported that they have attended meetings with the Group Home administrator, Group Home social worker, therapist, therapeutic behavioral services social worker, and the focus children to address the focus children's mental health needs, services being provided, behavior and NSP goals. The DCFS CSWs stated that the Group Home administrator and Group Home social workers are quick to respond to their inquiries regarding the focus children's medical, dental, school, counseling, and mental health status.

Tracking & Adjustment (5 Good Tracking & Adjustment Process)

Tracking & Adjustment Overview: The Group Home's intervention strategies, supports, and services generally reflect the needs of the focus children. The Group Home administrator and Group Home social workers also maintain regular contact with the DCFS CSWs and other team members to ensure that they are involved in making any necessary adjustments to the focus children's NSP goals.

The Group Home reported that it tracks each focus child's status daily, as the Group Home staff shares the focus children's status with each other when shift changes occur to ensure the next shift is aware of the focus children's current status. Any concerns regarding the focus children's behaviors or special incidents were documented in the Group Home's daily log. The Group Home childcare worker stated that she contacts the focus children's therapist at least once a week to discuss the focus children's progress and their mental health status.

The Group Home administrator and staff track services provided to the focus children by reviewing various Group Home logs including; the shift log, communication log, daily activities log, visitation log and SIR tracking log. The Group Home also reviews NSPs, school reports, therapist reports and notes received from the focus children's teachers. The Group Home therapist reviews the focus children's NSP goals and conducts weekly individual sessions with them. The Group Home administrator and Group Home social workers also ensure adjustments or modifications are promptly made if the focus children are not progressing towards their NSP goals. For example, the second focus child indicated that she needed assistance with World History. The Group Home provided her with tutoring twice a week which resulted in her improving her grade in World History.

The DCFS CSWs stated that they received frequent updates regarding the focus children's status from the Group Home staff.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In July 2015, OHCMD provided the Group Home with technical support related to findings indicated in the 2014-2015 Contract Compliance Review, which consisted of the following: understanding and following through with all visitation orders; review of procedures for submitting timely NSPs; what the Group Home can do to ensure that all placed children are treated with respect; and to ensure that Group Home staff explain personal rights to all placed children.

In August 2015, the OHCMD Quality Assurance Reviewer met with the Group Home to discuss the results of the QAR. The Group Home scored at or above the minimum acceptable score, therefore a Quality Improvement Plan was not requested of the Group Home. However, OHCMD Quality Assurance staff has and will continue to provide ongoing technical support, training, and consultation, as needed to the Group Home.